

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

ADDRESS (number and street)

INTERSTATE 20 @ ALPINE ROAD

☐Check if different  
than previously  
reported. (ACC)

COLUMBIA

SC

29219

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00406850

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

05

01

2006

through

05

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES HOEBERLING

Signature of Treasurer

Electronically Filed by JAMES HOEBERLING

Date

06

15

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	5		0	1		2	0	0	6

To:

M	M		D	D		Y	Y	Y	Y
0	5		3	1		2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		24721.76
(b) Cash on Hand at Beginning of Reporting Period .....	42529.35	
(c) Total Receipts (from Line 19) .....	5276.10	28583.69
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	47805.45	53305.45
7. Total Disbursements (from Line 31) .....	0.00	5500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	47805.45	47805.45
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2086.00	6382.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	3190.10	22201.69
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	5276.10	28583.69
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	5276.10	28583.69
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5276.10	28583.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5276.10	28583.69

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	5500.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		0.00	5500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		0.00	5500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5276.10	28583.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5276.10	28583.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 16

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kay L. Andrews Mailing Address 514 Prestwick Drive City State Zip Code Florence SC 29501 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C88962 Amount of Each Receipt this Period 70.00 Receipt Payroll Deduction: (70.00- /Pay Period )	
<b>B.</b> Full Name (Last, First, Middle Initial) Steven Barlow Mailing Address P.O. Box 835013 City State Zip Code Richardson TX 75083 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C88863 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (40.00- /Pay Period )	
<b>C.</b> Full Name (Last, First, Middle Initial) Vincent Batten Mailing Address 119 Duchess Trail City State Zip Code Lexington SC 29073 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C89106 Amount of Each Receipt this Period 60.00 Receipt Payroll Deduction: (60.00- /Pay Period )	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			170.00	
<b>TOTAL</b> This Period (last page this line number only) .....				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Neal Burkhead  
Mailing Address 103 Cypress Ridge Circle

City State Zip Code  
Columbia SC 29229

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
Avp Medicare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88922

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (40.00-  
/Pay Period)

**B.** Full Name (Last, First, Middle Initial)  
Judith M. Davis  
Mailing Address 5123 Lakeshore Drive

City State Zip Code  
Columbia SC 29206

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
Vp & Corp General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C89067

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (50.00-  
/Pay Period)

**C.** Full Name (Last, First, Middle Initial)  
Jim Deyling  
Mailing Address 81 Redbay Road

City State Zip Code  
Elgin SC 29045

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C89059

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (50.00-  
/Pay Period)

SUBTOTAL of Receipts This Page (optional) .....

140.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

Full Name (Last, First, Middle Initial)

**A.** Joyce C. Gandy

Mailing Address 2106 Elderberry Drive

City State Zip Code  
 Florence SC 29505

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bc/bs Of South Carolina

Occupation  
Director, Medical Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88984

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (40.00-  
/Pay Period )

Full Name (Last, First, Middle Initial)

**B.** Harry E. Greenleaf, II

Mailing Address 104 Wildewood Club Court

City State Zip Code  
 Columbia SC 29223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
President, Q4

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88955

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (40.00-  
/Pay Period )

Full Name (Last, First, Middle Initial)

**C.** Barbara Harvey

Mailing Address 11800 S State Hwy 34

City State Zip Code  
 Scurry TX 75158

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
Vp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88872

Amount of Each Receipt this Period

150.00

Receipt

Payroll Deduction: (150.0-  
0/Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

230.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

**A.** Full Name (Last, First, Middle Initial)  
Charles L. Higgins  
Mailing Address 505 Meadow Brook Road

City State Zip Code  
Columbia SC 29223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross Blue Shield Of  
South

Occupation  
Ethics Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88988

Amount of Each Receipt this Period

60.00

Receipt

Payroll Deduction: (60.00-  
/Pay Period )

**B.** Full Name (Last, First, Middle Initial)  
Cathy Huddle  
Mailing Address 132 Water Links Drive

City State Zip Code  
Chapin SC 29036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bluecross Blueshield Of  
South

Occupation  
Vp, Services Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C89088

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (50.00-  
/Pay Period )

**C.** Full Name (Last, First, Middle Initial)  
Robert W. Johnson  
Mailing Address 408 Cedar Road

City State Zip Code  
Windsor SC 29856

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
Vp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88993

Amount of Each Receipt this Period

110.00

Receipt

Payroll Deduction: (110.0-  
0/Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

220.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 16

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Barbara A. Kelly Mailing Address 11 Stockton Court City State Zip Code Blythewood SC 29016 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Blue Cross Blue Shield Of South Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Vice President Hr Aggregate Year-to-Date ▼ 265.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C88995 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (50.00- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) James A. Kernan Mailing Address 1700 Blair Court City State Zip Code Carrollton TX 75010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Blue Cross Blue Shield Of South Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Cfo-trailblazer Aggregate Year-to-Date ▼ 220.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C88873 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (40.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Ken Kerns Mailing Address 3 Dilton Court City State Zip Code Richmond VA 23238 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Blue Cross Blue Shield Of South Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Avp Aggregate Year-to-Date ▼ 328.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C88874 Amount of Each Receipt this Period 64.00 Receipt Payroll Deduction: (64.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			154.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 11 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Pat Lewis		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 220 Reeves Road		<b>Transaction ID:</b> 60612.C88867
City Pottsboro	State TX	Zip Code 75076
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Bcbs Of South Carolina	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	Payroll Deduction: (50.00- /Pay Period )

<b>B.</b> Full Name (Last, First, Middle Initial) John M. Little, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address P.o. Box 248		<b>Transaction ID:</b> 60612.C89084
City Fort Mill	State SC	Zip Code 29716
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Bluecross Blueshield Of South	Occupation Vp, Health Care Services	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	Payroll Deduction: (40.00- /Pay Period )

<b>C.</b> Full Name (Last, First, Middle Initial) Mark Macdougall		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 287 Wateree River Road		<b>Transaction ID:</b> 60612.C88998
City Surfside Beach	State SC	Zip Code 29575
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Blue Cross Blue Shield Of Sout	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	Payroll Deduction: (40.00- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 / 16

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

**A.** Full Name (Last, First, Middle Initial)  
 Martha P Mahaffey  
 Mailing Address 10121 Daria Drive

City State Zip Code  
 Dallas TX 75229

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield Of  
 South

Occupation  
 Evp/coo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88862

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (50.00-  
/Pay Period)

**B.** Full Name (Last, First, Middle Initial)  
 Scott J. Manning  
 Mailing Address 6500 Wildwood Drive

City State Zip Code  
 Mckinney TX 75070

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield Of  
 South

Occupation  
 Vp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88876

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (40.00-  
/Pay Period)

**C.** Full Name (Last, First, Middle Initial)  
 Mary P. Mazzola Spivey  
 Mailing Address 1399 Kathwood Drive

City State Zip Code  
 Columbia SC 29206

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield Of  
 South

Occupation  
 Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C89001

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (40.00-  
/Pay Period)

SUBTOTAL of Receipts This Page (optional) .....

130.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Duncan S. McIntosh		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 2859 Gervais Street		<b>Transaction ID:</b> 60612.C89004
City Columbia	State SC	Zip Code 29204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Blue Cross Blue Shield Of South	Occupation Sr Deputy Gen Counsel	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	Payroll Deduction: (40.00- /Pay Period )

<b>B.</b> Full Name (Last, First, Middle Initial) William Meyer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 2737 Cypress Bend Road		<b>Transaction ID:</b> 60612.C89138
City Florence	State SC	Zip Code 29506
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Blue Cross Blue Shield Of South	Occupation Sr Vice President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	Payroll Deduction: (300.0- 0/Pay Period )

<b>C.</b> Full Name (Last, First, Middle Initial) Helen B. Murray		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 392 Stoneridge Court		<b>Transaction ID:</b> 60612.C89010
City Blythewood	State SC	Zip Code 29016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Blue Cross Blue Shield Of South	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	Payroll Deduction: (100.0- 0/Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

440.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Terry A. Peace Mailing Address 460 Old Ferry Road City State Zip Code Chapin SC 29036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Blue Cross Blue Shield Of South Occupation Sr Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 410.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C89016 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (80.00- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Ronald L. Rushton Mailing Address 106 W Butler Ave City State Zip Code Saluda SC 29138 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Blue Cross Blue Shield Of South Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C89021 Amount of Each Receipt this Period 60.00 Receipt Payroll Deduction: (60.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Michael J. Skarupa Mailing Address 2668 Trotter Road City State Zip Code Florence SC 29501 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Blue Cross Blue Shield Of South Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60612.C89092 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (100.0- 0/Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		240.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 16

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

Full Name (Last, First, Middle Initial)

A. Jennifer Sparkes

Mailing Address 1410 N. Dogwood Drive

City State Zip Code  
 Surfside Beach SC 29575

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
Training Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C89072

Amount of Each Receipt this Period

42.00

Receipt

Payroll Deduction: (42.00-  
/Pay Period )

Full Name (Last, First, Middle Initial)

B. Dwight M. Wicker

Mailing Address 1813 Brigadoone Lane

City State Zip Code  
 Florence SC 29505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C89033

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (50.00-  
/Pay Period )

Full Name (Last, First, Middle Initial)

C. Stephen K. Wiggins

Mailing Address 510 Winding Way

City State Zip Code  
 Columbia SC 29212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation  
Sr Vice President & Cio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C89034

Amount of Each Receipt this Period

80.00

Receipt

Payroll Deduction: (80.00-  
/Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

172.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 16

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FEDERAL GOVT PROGRAMS PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Wright

Mailing Address 535 Old Cherokee Road

City

Lexington

State

SC

Zip Code

29072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield Of  
Sout

Occupation

Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60612.C88921

Amount of Each Receipt this Period

60.00

Receipt

Payroll Deduction: (60.00-  
/Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

2086.00